



North Carolina Department of Health and Human Services Office of the Controller

Michael F. Easley, Governor
Carmen Hooker Odom, Secretary

Gary Fuquay, Controller
(919) 733-0169

MAILING ADDRESS:
2020 Mail Service Center
Raleigh, NC 27699-2020

LOCATION:
616 Oberlin Road
Raleigh, NC

NOTIFICATION LETTER

NAME
ADDRESS
CITY ZIP CODE

RE: DEBT COLLECTION

Dear :

This is to notify you that as set forth in Chapter 105A of the North Carolina General Statutes the (Division, Center, or School) is seeking collection of a salary overpayment owed to the (Division, Center, or School) by former employees.

Supporting documentation on file indicates that you owe the amount of \$_____ for (time overpayments occurred). Previous correspondence have been sent to you concerning this matter.

In accordance with Chapter 105A of the General Statutes, and in efforts to secure this money, we advised the Department of Revenue to withhold and send this office \$_____ less the \$4.12 collection assistance fee from your State Income Tax Refund in (**partial/complete**) satisfaction of the debt owed to the (Division, Center, or School).

Pursuant to General Statutes 105A-7 and 105A-8, you have a right to contest this action. You may contest this action by filing a **written** petition for a contested case hearing with the:

Office of Administrative Hearings
PO Drawer 27447
Raleigh NC 27611 7447

Telephone: 919-733-2698

This must be done **within thirty (30) days of the mailing date of this notice.** Notice of your petition for a contested case hearing must also be served on a DHHS process agent and/or Agency Counsel at the Department of Health and Human Services, 101 Blair Drive, Raleigh NC 27626-0526. If you have questions concerning the appeals process, please contact the Office of Administrative Hearings at the address and telephone indicated above. Your failure to appeal to this action within thirty (30) days as set out above will constitute a waiver of your rights to contest this action.

If you have any questions concerning this issue please call **(Human Resources Manager) at (phone number).**

Sincerely,

Annette B. Chandler
Assistant Payroll Officer

Enclosures

Date Mailed: _____

cc: (Human Resources Manager)
Payroll Section
Employee personnel file or Human Resources Debt Collection File